

Substitute for form 1449/PTO				<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (Use as many sheets as necessary)				<b>Application Number</b>	10/700,299
				<b>Filing Date</b>	October 31, 2003
				<b>First Named Inventor</b>	DiFrancesco, David
				<b>Art Unit</b>	2621
				<b>Examiner Name</b>	David J. Czekaj
<b>Sheet</b>	1	<b>of</b>	1	<b>Attorney Docket Number</b>	021751-002160US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
/DC:  ↓  ↓	1	4,096,530 A	06-20-1978	Plugge et al.	
	2	5,294,993 A	03-15-1994	Sable	
	3	5,653,522 A	08-05-1997	Loucks	
	4	5,771,109 A	06-23-1998	DiFrancesco	
	5	5,975,705 A	11-02-1999	Lee	
	6	6,262,790	07-17-2001	Kinjo	
	7	6,359,676 B1	03-19-2002	Treiber et al.	
	8	2002/0163657 A1	11-07-2002	Bogdanowicz et al.	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
			<input type="checkbox"/>

Examiner Signature	/David Czekaj/	Date Considered	06/07/2009
--------------------	----------------	-----------------	------------

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.